This sample reflects the thinking of a single examiner and should not necessarily be viewed as a "right" or "wrong" assessment of the applicant.

Item 7.3

## List the 4-6 key business/organization factors that are most relevant to this Item.

1. **Mission, Vision, Values (Figure P.1-2)** - Mission: Provide ageless care and timeless living to individuals in a homelike environment that supports their lifestyles and need for care with dignity and respect

Vision: Be among the top 10% of Skilled Nursing Facilities (SNFs) and Assisted Living Facilities (ALFs) and be a top choice for care Values: Agility, Patience, Empathy, and excellence (APEX)

2. Employee and Workforce Demographics (Figure P.1-3) - 3,718 employees; F 86%, M 14%;

< 20 1% 21–39 32% 40–59 56% > 60 11%;

Caucasian 74%, African American 15%, Hispanic 8%, other 3%;

No HS degree 1%, HS diploma 48%, some college 41%, college degrees 10%;

Nursing: 76% (RN 13%, LPN 10%, CNA 53%), other professional 8%, other technical 3%, service 9%, office/clerical 4%;

< 1 year, 15%; 1–10 years, 54%; 11–25 years, 25%; < 26 years, 6%;

Full-time, 53%; part-time, 29%; per diem, 18%

Day, 72%; evening, 16%; night, 12%;

91% of employees live in communities surrounding facilities;

Physicians from partner groups and under contract, as well as community-based attending physicians and nurse practitioners – applicant views physicians as partners and collaborators who participate in strategic planning and improvement activities;

700 volunteers help residents use technology, administer surveys, transport residents to therapy, support special events at the facilities; No bargaining units

- 3. **Workforce Groups**: Employees, physicians, volunteers; Engagement Factors Good work environment; Good benefits; Positive relationships with coworkers; Pride in the organization; A voice in resident care
- 4. **Workforce Health and Safety Requirements** Protection for exposure to communicable diseases; Protection form injury while assisting and lifting residents; Support in managing residents (including agitated residents); Support for a healthy lifestyle; A voice in resident care
- 5. **Key Competitors**: Melloughby Health, Pamlico Senior Living, and Warmlee Senior Care, as well as all other CMS 5-Star-rated facilities within 50 miles of each facility; growth anticipated over next four years due to baby boomers and building four new facilities
- 6. Sources of comparative data: CAHPS questions, CMS Nursing Home Compare, USSN Data Dispatcher, Caring Colleagues, NursQM

List approximately **6** of the most important strengths and opportunities for improvement (OFIs) for this Item in order of their importance to the applicant. Base these strengths and OFIs on the applicant's response to the Criteria requirements and its key business/organization factors. Refer to figures when appropriate.

- In the first column, record the numbers of the most relevant key factor(s).
- In the LeTCI columns, check the process evaluation factors that your statement addresses:

Le = Levels

T = Trends

C = Comparatives

I = Integration

Strengths/OFIs should be placed in order of importance to the applicant.

✓ In the last column, record the Item reference(s) for the strengths and gaps/OFIs.

KF Ref.	++	Strengths	As Evidenced by	Le	T	С	ı	Item Ref.
2,3,6	х	Workforce satisfaction results demonstrate	Overall employee satisfaction levels have consistently	х	X	X	Х	a(3)

	top decile performance for the last two years. Employee Engagement demonstrates top decile results in two out of three measures and Turnover and Vacancy Rates also indicate top decile performance in all employee categories.	been maintained or improved over the past six years, and currently exceed the top decile benchmark of 80% (Figure 7.3-4). Similar trends and levels exist for the four satisfaction and three engagement survey response-specific results that are provided (7.3-5 and 7.3-6).  Overall Employee Satisfaction: stable trend at top decile since 2008  Employee Satisfaction: improving trends at or above top decile since 2010 for all  Employee Engagement: with exception of voice in resident care at top decile since 2010;  Turnover and vacancy rate: professional staff turnover improving trends since 2007 better than top decile since 2010  Paraprofessional improving trends since 2008 better than top decile since 2009; volunteer turnover improving since 2008 better than top decile since 2009				
	Results for indicators of workforce capability (effectiveness of training is demonstrated through improved outcomes)	Weak strength 7.3-1: Residents with pressure ulcers-generally improving trend currently at top decile; use of restraints generally declining at average  Course enrollments and waiver savings have almost				
1,2,5		doubled as well over four years (Figure 7.3-8), and APEX Performance incentive award rates have tripled in four years (Figure 7.3-9), showing further evidence of workforce capability need support.	X			a(1)
	Capability result that's indirect – staff are not leaving	Figure 7.3-7 reflects the reduction in both turnover and vacancy rates that have been realized by the professional, paraprofessional, and volunteer staff groups over the past five years.				
3,4,6	Employee safety results are nearing or have surpassed top decile performance  Beneficial levels and trends in measure of health and safety	Figure 7.3-2 reflects the reduction in both back injuries and workers' compensation costs that have been realized by the applicant over the past four years. Both indicators are approaching top decile levels of performance as well. There also appears to be a positive correlation between	x	х	x	a(2)

		the nursing hours invested and the percentage of patients with pressure ulcers, as the latter value has declined to a level that is near the top decile benchmark (Figure 7.3-1). Employee Back Injury demonstrates improving trends in the number of employees reporting an injury from 45 in 2005 to 5 in 2011; Workers' compensation as a % of budget has also decline in the same time period and is currently at top decile performance. The Influenza Vaccination Rate of Employees while not at goal have improved year over year from 90.5% in 2010 to 94% in 2011.					
KF Ref.	 Gaps and OFIs	As Evidenced by	Le	Т	С	ı	Item Ref.
1,2,3,4	Multiple measures of workforce-focused outcomes are not provided.	Missing measures- skill and competency assessments, peer evaluations, outcomes for multiple recruitment methods, annual TB screening, injuries other than back, lost time to injury, blood-borne pathogen exposure, weekly inspection of parking lot lighting, and succession planning measures.  Significance - Use of such measures may assist the applicant in addressing factors that could impact the health and safety of its workforce.	x				a(4)
2,3,4	Limited results are provided on competencies or skill levels; no results for workforce and leader development.  Results for capacity are limited to staffing ratios exceeding the national average since 2005.  Results not reported for tuberculosis screening, injuries unrelated to resident care, injury from agitated resident, or lost time due to injury.	rationale they give in text led to weak strength but still need to see additional results if go to site no capacity results for physicians and could tie to access for residents	x			x	a(1)
1,4	Limited segmentation	Unclear if opportunities exist in service lines or locations for several measures Employee Satisfaction Influenza rate for employees			х		a

	Satisfa Tuition Incent	entation for physicians, students and volunteers also	
Double	P a d	Concisely state the feedback in the first sentence of the comment.  Provide additional key evidence such as 1–2 examples or evidence that addresses the most important evaluation factors (e.g., approach, deployment, learning, or integration). Limit the length of the comment to less than 75 words or 500 characters of text.	Item Ref.
х	In support of APEX, workforce satisfaction results demonstrate top-decile performance levels for the last two years.  Employee Engagement demonstrates top decile performance in two out of three measures. As a result, the applicant has low turnover and vacancy rates that are demonstrating top-decile performance levels in all employee categories.		
	Multiple measures of workforce-focused outcomes are not propertion for skill and competency assessments, peer evaluations, outcompositions, injuries other than back, lost time to injury, bloodlot lighting, and succession planning measures. Use of such may impact the health and safety of its workforce.	comes for multiple recruitment methods, annual TB -borne pathogen exposure, weekly inspection of parking	a(4)

Scoring	Range
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0-5%	50–65%		
10–25%	70–85%		
X 30-45%	90–100%	Percentage Score: _35%	Independent Review Worksheet—Item 7.3